## LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

## Instructions

· Print in ink or type.

1. NAME

COHOON

- Complete form and return with \$10 registration fee to the Board of Ethics, 8401 United Plaza Blvd., Suite 200 Baton Rouge, I.A 70809-7017, (225) 922-1400 or (800) 842-6630.
- Initial registrations must be submitted within 5 days of (1) employment as a
  liabbyist or (2) first action requiring registration. Registrations expire as of
  December 31 unless a renewal is submitted between December 1 and January
  31.

DERRELL

# 19867 1010059 crson, group, or on or group;

D.

Lobbyist's Registration Number

FOR OFFICE USE ONLY Postmark Date: 1-15-01

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BUSINESSPIION			503		<u>.</u>	10000
	Are	a Cocle and Phone No	umber			
, BUSINESS ADDI		North Stre				
	Spe	ct and No.	City		State	Zip
MAILING ADDR	ESS Same	as Above		1000 A		
	Stre	et and No.	City	81-31-44 81-31-44	State	Zip
5. EMPLOYER'S A	DDRESS 620	North Str Smeet and No.	reet, Bator City	State	LA 708 Zip	302
, BMFLOTERSA			25.7			
	Names of necessors	s, erones, or organ	izations which vo	u regresent: (t	) the address	of each s
6. LIST BELOW (a) organization you	represent; (c) the t	s, groups, or organ ype of business eac eone else pays you	ch is engaged in o	u represent; (t r the purpose	o) the address or function of	of each s I the orgo
6. LIST BELOW (a) organization you	represent; (c) the t t the client or some	ype of business ear	ch is engaged in o to lobby.	r the purpose	or function of	(the orga
<ol> <li>LIST BELOW (a) organization you</li> <li>(d) whether or no</li> </ol>	represent; (c) the t the client or some Louisiana	ype of business ear eone else pays you	ch is engaged in o to lobby. d General	r the purpose	or function of	f the organ
LIST BELOW (a)     organization you     (d) whether or no     1. Name	represent; (c) the t the client or some Louisiana 820 North	ype of business ear eone else pays you Associated	ch is engaged in o to lobby. d General daton Rouge	r the purpose	or function of	Tthe organ

If No, who pays you?

## LOBBYING REGISTRATION FORM

22 Lobbyist's Registration Number

2.	Name
	Address
	Business or purpose
	Does this person pay you?
	If No, who pays you?
3.	Name
	Address
	Business or purpose
	Does this person pay you?
	If No, who pays you?
4.	Name
	Address
	Business or purpose
	Does this person pay you?
	If No, who pays you?

## CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted,

Signature of Lobbyist

ATTACH
2' x 2'
PHOTOGRAPH
HERE
FOR
INITIAL
REGISTRATION
ONLY